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APPLICATION NO.	FILING DATE	FIRST NAMED INVE		D INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/009,236	05/06/2002 David Blaker 026032-3873 6340						6340
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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EXAM	ART UNIT CL			ASS-SUBCLASS	1		
JACKSON, BLANE J		2685		455-343000			
1. Change of correspondence		ee Address" (37	2. For prin	ting on t	he patent front page, lis	st	
CFR 1.363). Change of correspond Address form PTO/SB/12	Foley & Lardner LLP				Lardner LLP		
Tree Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	tion form registered attorney or agent) and the names of up to						
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						ee is identified below, the do	ocument has been filed for
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5. Change in Entity Status ()					
	MALL ENTITY status. See 3					L ENTITY status. See 37 CF	
The Director of the USPTO in NOTE: The Issue Fee and Puinterest as shown by the recommendation	s requested to apply the Issu iblication Fee (if required) w rds of the United States Pate	e Fee and Publicat ill not be accepted nt and Trademark	ion Fee (if any from anyone Office.	y) or to re other tha	e-apply any previously n the applicant; a regist	paid issue fee to the applicati tered attorney or agent; or the	on identified above. assignee or other party in
Authorized Signature		ibbetts				/18/05	
Typed or printed name	Gean M. Tibbett	s			Registration N	43,193	

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Blaker, et al.

Title:

TRANSCEIVER WITH

CLOSED LOOP

CONTROL OF ANTENNA TUNING AND POWER

LEVEL

Appl. No.:

10/009,236

Filing Date:

06/07/2000

Examiner:

Jackson, Blane J.

Art Unit:

2685

Confirmation No.:

6340

ISSUE FEE TRANSMITTAL

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed herewith please find Issue Fee Transmittal Form PTOL-85(B) along with a check in the amount of \$1,400.00 for payment of the Issue Fee.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.18, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Respectfully submitted,

Date 10/18/05

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By

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